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I hereby certify under 37 C.F.R. § 1.10 that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with sufficient postage on the date indicated above and is addressed to: BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C. 20231

Guy Beardsley

Preliminary Amendment

Printed name of person mailing correspondence

Signature of person mailing correspondence

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)					
Attorney Docket Number	00742/066002				
Applicant	Thomas L. Benjamin, et al.				
Title	DIAGNOSING AN TREATING CANCER CELLS USING Sal2				
PRIORITY INFORMATION:					
This application is a continuation-in-part of and claims priority from United States patent application 09/812,633, filed March 19, 2001, and claims priority from U.S. Provisional Application Number 60/216,723, filed on July 7, 2000, the disclosures of which are hereby included by reference.					
SMALL ENTITY STATUS:					
■ Applicant claims small entity sta	tus under 37 C.F.R. § 1.27.				
APPLICATION ELEMENTS:					
Cover sheet		1 page			
Specification		50 pages			
Claims		2 pages			
Abstract		1 pages			
Drawing		11 sheets			
Combined Declaration and POA, which is: Unsigned; Newly signed for this application; A copy from prior application [**SERIAL NUMBER**] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.		3 pages			
Sequence Statement		2 pages			
Sequence Listing on Paper		15 pages			
Sequence Listing on Diskette		1 disk			
Small Entity Statement, which is: A copy from prior application [**SERIAL NUMBER**] and such small entity status is still proper and desired.		[**] pages			

[**] pages



IDS	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages
English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee: \$370	\$370.0
Excess Claims Fee: 10 - 20 x \$9	\$***
Excess Independent Claims Fee: 3 - 3 x \$42	\$***
Multiple Dependent Claims Fee: \$140	\$***
Total Fees:	\$370.0

- Enclosed is a check for \$370.00 to cover the total fees.
- □ Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees.
- ☐ The filing fee is not being paid at this time.
- Please apply any other charges, or any credits, to Deposit Account No. 03-2095.

CORRESPONDENCE ADDRESS:

Kristina Bieker-Brady, Ph.D.

Reg. No. 39,109 Clark & Elbing LLP 176 Federal Street Boston, MA 02110

Telephone: 617-428-0200 Facsimile: 617-428-7045

November 16, 200,

Date

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Signature

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